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## **Testimony Against HB 4059**

**Katie Oppenheim, Chair, University of Michigan Professional Nurse Council**

**Senate Reforms, Restructuring & Reinventing Committee**

**Rooms 402-403, Capitol Building, Lansing**

Good morning. Thank you Mr. Chair, and members of the committee, for giving me the opportunity to testify this morning. My name is Katie Oppenheim and I am Chair of the University of Michigan Professional Nurse Council, the local bargaining unit for nurses at the U of M Health System. We are represented by the Michigan Nurses Association.

I am here today advocating for my fellow nurses' collective bargaining rights and the ability to do that in a manner that is cooperative and efficient. Nurses have to be able to bargain with freedom and without restrictions so that we can continue to make safe patient care our number one priority. I have very serious concerns about HB 4059 and I know first-hand that this legislation will hamper our ability as nurses to ensure safe patient care, 365 days a year, 7 days a week, 24 hours a day.

In our local bargaining unit, we have 4,500 members who cover 104 work sites over 75 square miles. We have three full-time release members, including me. We consistently work with the university to address all manner of concerns and to solve all problems at the most local level.

Our continued and long-standing practice of meeting face to face and establishing that local relationship is the key to our successful collective bargaining process and that, in turn, positively affects everyone. Having the individuals who are most directly involved working together (like the university representatives and the full-time release nurses from the professional nurse council) is what works well to ensure that everyone's needs are being met in the safest and best ways possible.

Our Nursing Health and Safety Council, which is a contractual committee made up of management and employees, meets once a month to review all safety issues. For example, we're currently looking at the number of back injuries and lifting concerns that we see in our particular health system and we are trying to find a way to reduce and eliminate the problem collectively.

Additionally, the entire joint leadership team of management and employee members meets once a month to ensure that the current contract is being implemented correctly and according to what was agreed upon. We use these monthly meetings to discuss issues like staffing and overtime, as well as units that are having difficulty and what we can do to collectively solve the problems so that safe patient care does not suffer.

We take the time to review and troubleshoot everything from higher level dispute resolution to analyzing monthly statistics around occurrences like patient falls and bed sores, to determine what

we need to change in order to ensure patient safety. It's a joint obligation between management and nurses and the common thread is that we are putting the patients first.

Currently, our health system is in the process of implementing the use of electronic health records. Nurses, the IT department and management are working together to make as smooth of a transition as possible so that health care delivery to all of our patients does not suffer or fall through the cracks. It's a joint effort and a team effort. It's a process that works well and we are not interested in fixing something that is not broken.

Our current model is beneficial to the university because we are always available to them when it comes to handling business related to collective bargaining. If this bill moves forward, union representatives will have to meet with employers at times like the early hours of the morning or in the middle of the night to get grievances, arbitrations and contract negotiations completed in a timely manner. In some cases, meetings like this can take three or four hours. It's not safe for patients and it's not healthy for nurses.

We already work on nights and weekends to take care of business with the employer. And this is without the restrictions you want to put in place with this bill. Placing restrictions on our ability to conduct the process will only hamper the progress we make in our employer/employee relationship and will therefore negatively impact our ability to advocate for our patients when they are at their most critical.

HB 4059 does nothing to create jobs or boost the economy, and it severely limits our ability to put safe patient care first, which is why thousands of us went into this profession. In the case of the University of Michigan Professional Nurse Council, if we cannot bargain without restrictions, we are limited in our ability to secure a fair contract in a timely manner so that we can continue to put patients first. As a health care professional, I cannot abide this and I sincerely hope you can see the enormously negative health care ramifications this could have on patients and health care delivery around the state.

I thank you for your time and, again, for allowing me the opportunity to testify today. I sincerely hope you will not move HB 4059 forward. Good health care is vitally important for people who are sick and injured and it is critical that the nurses who deliver it are allowed to do so without being limited and restricted by government interference. I welcome any questions you might have.